

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: <u>7-13-05</u>		2 Serial/Patent # <u>10/519783</u>	
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3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing			\$ <u>100</u>
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input type="checkbox"/> Petition			\$
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input type="checkbox"/> Other			\$

	7 TOTAL AMOUNT OF REFUND
	\$ <u>100</u>

10 REASON:	8 TO BE REFUNDED BY:							
<input checked="" type="checkbox"/> Overpayment	<input type="checkbox"/> Treasury Check							
<input type="checkbox"/> Duplicate Payment	<input checked="" type="checkbox"/> Credit Deposit A/C #:							
<input type="checkbox"/> No Fee Due (Explanation):	9 <table border="1" style="display: inline-table; text-align: center;"> <tr> <td style="width: 20px;">1</td> <td style="width: 20px;">8</td> <td style="width: 20px;">--</td> <td style="width: 20px;">0</td> <td style="width: 20px;">9</td> <td style="width: 20px;">8</td> <td style="width: 20px;">8</td> </tr> </table>	1	8	--	0	9	8	8
1	8	--	0	9	8	8		

11 REFUND REQUESTED BY:	
TYPED/PRINTED NAME: <u>John Anderson</u>	TITLE: <u>Paralegal Specialist</u>
SIGNATURE: <u>[Signature]</u>	PHONE: <u>308-9140 ext 211</u>
OFFICE: <u>PCT 00/50</u>	

THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED: _____ DATE: _____

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: